



BOARD FOR PROFESSIONAL ENGINEERS AND LAND SURVEYORS

2535 Capitol Oaks Drive, Suite 300, Sacramento, CA 95833-2944
(916) 263-2222 fax: (916) 263-2246
www.dca.ca.gov/pels

**Name Change Affidavit**

To: Board for Professional Engineers and Land Surveyors, State of California

I, _____, declare under
(Name)
penalty of perjury that the following declaration is true and correct:

I have changed my name for all intents and purposes **from:**

(Last)

(First)

(Middle)

to

(Last)

(First)

(Middle)

Examinee ID. Number/Branch: _____

License/Registration Number(s): _____
(List all branches in which you are licensed. Your name will be changed on the records for those you list.)

Effective date of change: _____

Daytime Phone Number: (____) _____

Signature

Social Security Number